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16638 U.S. PTO

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PTO/SB/50 (06-03)

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Mail Stop Reissue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Attorney Docket No.	1201.00033
	First Named Inventor	Jeffrey J. Lace et al.
	Original Patent Number	6,362,728
	Original Patent Issue Date (Month/Day/Year)	March 26, 2002
	Express Mail Label No.	EL671876097US

APPLICATION FOR REISSUE OF:
(Check applicable box)

Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

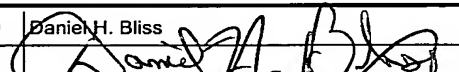
1. ☒ Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. ☒ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent format
(amended, if appropriate)
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)
(37 CFR 1.175) (PTO/SB/51 or 52)
6. ☒ Power of Attorney
7. ☒ Original U.S. Patent currently assigned? ☒ Yes ☐ No
(If Yes, check applicable box(es))
 - ☒ Written Consent of all Assignees (PTO/SB/53)
 - ☒ 37 CFR 3.73(b) Statement (PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix)
or large table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. ☒ Statement of status and support for all
changes to the claims. See 37 CFR 1.173(c).
11. ☒ Original Patent Grant
 - ☐ Ribboned Original Patent Grant
 - ☒ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS
Citations
14. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. Other: Statement Under 37 C.F.R. 1.17

18. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number:		OR	<input type="checkbox"/> Correspondence address below
Name	Daniel H. Bliss		
Address	Bliss McGlynn, P.C. 2075 West Big Beaver Road, Suite 600		
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		Fax	248-649-6299

Name (Print/Type)	Daniel H. Bliss	Registration No. (Attorney/Agent)	32,398
Signature		Date	October 22, 2003

This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

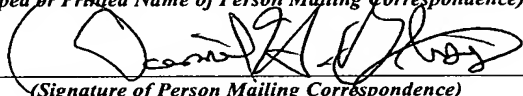
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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number 1201.00033	
Claims as Filed - Part 1							
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
(A)	(B)	(C)	(D)	Rate	Fee	Rate	Fee
20	20	Total Claims (37 CFR 1.16(j))	**** 0	x \$ 9 =	\$0	or	x \$ 18 = \$0
3	3	Independent claims (37 CFR 1.16(i))	* 0	x \$ 43 =	\$0	or	x \$ 86 = \$0
Basic Fee (37 CFR					\$385		\$770
Total Filing Fee					\$385		\$770
Claims as Amended - Part 2							
(1) Claims Remaining After Amendment	(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity		
Rate	Fee	Rate	Fee				
*** 28	MINUS ** 20	* 8	x \$ 9 = \$72	x \$ 18 = \$144			
*** 6	MINUS ***** 3	= 3	x \$ 43 = \$129	x \$ 86 = \$258			
Total Additional Fee			\$201	OR	\$402		
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____.</p> <p>A duplicate copy of this sheet is _____.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>02-2712</u>.</p> <p>A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>586</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p style="text-align: center;">WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p style="font-size: 1.2em; margin-bottom: 5px;">October 22, 2003</p> <p style="text-align: center;">Date</p> <p style="text-align: center;">32,398</p> <p style="text-align: center;">Registration Number, if applicable</p> </div> <div style="width: 45%; text-align: center;"> <p style="text-align: center;">Signature of Applicant, Attorney or Agent of Record</p> <p style="text-align: center;">Daniel H. Bliss</p> <p style="text-align: center;">Typed or printed name</p> </div> </div>							

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.

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CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)			Docket No. 1201.00033
Applicant(s): Jeffrey J. Lace and Jack Durban			
Serial No.	Filing Date	Examiner	Group Art Unit
Invention: ANTI-THEFT VEHICLE SYSTEM			
<p>I hereby certify that the following correspondence:</p> <div style="border: 1px solid black; padding: 5px;"><p>Reissue Patent Application Transmittal (in duplicate), Fee Transmittal (in duplicate), Copy of Issued Patent, Six (6) Sheets of Formal Drawings [Figs. 1 through 11], Statement of Inoperativeness or Invalidity of Original Patent Under 37 C.F.R. 1.175 for a Broadening Reissue, Consent of Assignee, Statement Under 37 C.F.R. 3.73(b), Declaration by Assignee, Statement as to Loss of Original Patent, Preliminary Amendment, check for \$586.00, and return postcard.</p></div> <p style="text-align: center;"><i>(Identify type of correspondence)</i></p> <p>is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on</p> <p style="text-align: center;"><u>October 22, 2003</u> <i>(Date)</i></p> <div style="text-align: center;"><p>Daniel H. Bliss <i>(Typed or Printed Name of Person Mailing Correspondence)</i></p><p> <i>(Signature of Person Mailing Correspondence)</i></p><p>EL671876097US <i>("Express Mail" Mailing Label Number)</i></p></div>			
<p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>			